145 7346

OMB APPROVAL

Expires: February 28, 2009

Estimated average burden

hours per response. 4.00

OMB Number:

3235-0076

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 2054**SEC Mail**

TEMPORARY

Mall Processing Section

FORM D FEB 20 2009 NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATIOND, DC SECTION 4(6), AND/OR 09 UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.)								
Private Placement of Limited Partner Interests of McCoy Investments II, L.P.								
Filing Under (Check box(es) that apply):								
A. BASIC IDENTIFICATION DATA								
1. Enter the information requested about the issuer								
Name of Issuer (Check if this is an amendment and name has changed, and indicate change.)								
								
McCoy Investments II, L.P.								
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 540 Medican Avenue 32th Floor New York NY 40023								
540 Madison Avenue, 38th Floor, New York, NY 10022 (212) 710-5231								
Address of Principal Business Operations (if different from Executive Offices) (Number in Africa Code) (Number in Africa Code) (Number in Africa Code)								
Brief Description of Business MAR 5 2009								
THADSOALBEITER								
Private equity investment fund formed for the purpose of manipolities were private equity investment fund formed for the purpose of manipolities and debt securities of companies.								
Type of Business Organization								
□ corporation □ limited partnership, already formed □ other (please specify). □ business trust □ limited partnership, to be formed □ other (please specify).								
Month Year Actual or Estimated Date of Incorporation or Organization: 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: 09003783								
CN for Canada; FN for other foreign jurisdiction)								
GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239,500T) that is available to be filled instead of Form D (17 CFR 239,500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239,500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239,500) but, if it does, the issuer must file amendments using Form D (17 CFR 239,500) and otherwise comply with all the requirements of § 230,503T. Federal: Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549. Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities Ad								
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.								

SEC 1972 (9-08)

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a	class of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and managing partners of p	artnership issuers; and
Each general and managing partner of partnership issuers.	-
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Vedanta Partners, LLC (General Partner of the Issuer)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
540 Madison Avenue, 38th Floor, New York, NY 10022	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Saxena, Parag	
Business or Residence Address (Number and Street, City, State, Zip Code)	
540 Madison Avenue, 38th Floor, New York, NY 10022	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Goldstein, Howard	
Business or Residence Address (Number and Street, City, State, Zip Code)	
540 Madison Avenue, 38th Floor, New York, NY 10022	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Piol, Alessandro	
Business or Residence Address (Number and Street, City, State, Zip Code)	
540 Madison Avenue, 38th Floor, New York, NY 10022	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Las' name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary	y)

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?			t) If			B. 11	NFORMATI	ON ABOU	T OFFER	ING				
2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the ir formation requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar enumeration for solicitation of purchasers in connection with askes of securities in the Offering If a person to be listed is an associated person or solicitation of purchasers in connection with askes of securities in the offering or states, flit the nature of the broker of relater. If more than five (5) persons to be listed are associated person or solicitation for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (N	1.	Has the	issuer sold	l, or does th										
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, lit the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer goals a state or states, lit the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer ends. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "Al States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "Al States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "Al States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "Al States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual	2.	•• • • • • • • • • • • • • • • • • • • •								*****************	\$ 100,	000_		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of Securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											Yes			
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agan for a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											X			
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								he offering. with a state				
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full	l Name (I	Last name	first, if indi	ividual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Cheek "All States" or check individual States)	Bus	siness or l	Residence	Address (N	lumber and	l Street, Ci	ity, State, Z	ip Code)	,					
(Check "All States" or check individual States) All AK AZ AR CA CO CT DE DC EL GA HI LID II. IIN IA KS KY LA ME MID MA MI MN MS MO MT NE NY NH NJ NM NY NC ND DH OK OR PA RI SC SD TN TX LIT VT VA WA WY WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Assoc ated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All AK AZ AR CA CO CT DE DC EL GA HI LID III. IIN IA KS KY LA ME MD MA MI MN MS MO MT NE NY NH NI NI NM NY NC ND DH OK OR PA RI SC SD TN TX LIT VT VA WA WY WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All AK AZ AR CA CO CT DE DC EL GA HI ID III. IIN IAA KS KY LA ME MD MA MI MN MS MO MM MN MS MO MM MN NS MO MM MN NS MO MM MN MS MO MM MN MN MS MO MM MN MS MO MM MN MN MS MO MM MN MS MO MM MN MN MS MO MM MN MS MO MM MN MN MS MO MM MN MN MS MO MM MN MS MO	Nar	ne of Ass	ociated Br	oker or De	aler									
All AK AZ AR CA CO CT DE DC FI GA HI ID III. IIN IA RS RY LA ME MD MA MI MN MS MO MT NE NV NH NI NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Assoc ated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Stat										- 120			
III. IN IA KS KY IA ME MD MA MI MN MS MO MT NE NY NH NI NI NM NY NC ND OH OK OR PA RI SCC SD TN TX UT YT VA WA WY WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Assoc ated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		(Check	"All States	" or check	indiviđual	States)	***************************************	***************************************			***************************************		A1	States
MT NE NV NH NI NM NV NC ND OH OK OR PA			.—											
RI SC SD TN TX UT YT VA WA WY WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Assoc ated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)							=							
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Assoc ated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Assoc ated Broker or Dealer States in Which: Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
Name of Assoc ated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full	l Name (I	_ast name t	first, if indi	ividual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
(Check "All States" or check individual States)	Nar	ne of Ass	oc ated Br	oker or De	aler									
AL AK AZ AR CA CO CT DE DC FL GA HI ID III IIN IA KS KY IA ME MD MA MI MN MS MO MT NE NV NH NI NM NY NC ND OH OK OR PA RI ISC SD TN TX IIT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States AL AK AZ AR CA CO CT DE DC FL GA HI ID III IN IA KS KY IA ME MD MA MI MN MS MO MT NE NV NH NI NM NY NC ND OH OK OR PA	Stat								-					
II. IIN IA KS KY IA ME MD MA MI MN MS MO MT NE NV NH NI NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		(Check	"All States	or check	individual	States)				•••••	•••••		☐ All	l States
MT NE NY NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UIT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		AL	AK	AZ.	AR		CO	CT	DE	DC	FL.	GA		ها
RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Ful													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)			-			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Mar	ne of Acc	ociated Br	oker or De	2105			<u>-</u>					<u> </u>	
(Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NY NH NJ NM NY NC ND OH OK OR PA	INAI	iie oi Ass	ociated bi	okei oi De	aici									
AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NY NH NI NM NY NC ND OH OK OR PA	Stat									•				
IL IN IA KS KY IA ME MD MA MI MN MS MO MT NE NY NH NJ NM NY NC ND OH OK OR PA		(Check	"All States	or check	individual	States)	······				****************		☐ All	States
MT NE NY NH NJ NM NY NC ND OH OK OR PA														
المطلقا للتلق المحتلف المتبينا المتبين المتبين المتبين المتبين المتبينا المتبينا المتبينا المتبينا المتبينا		RI	SC	SD	TN	TX	UI	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

 $^{^{\}bullet}$ The General Partner reserves the right to adjust the minimum participation. $^{-3}$ of 9

_	C OPPONING DRICE NUMBER OF INVESTAGE EVERNORS AND LICE OF	PROCEEDS	
_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		4
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	0	\$0
	Equity	0	\$ 0
	Common Preferred		
	Convertible Securities (including warrants)	0	\$0
	Partnership Interests	150,000,000	\$ 900,000
	Other (Specify)	0	\$ <u>0</u>
	'Total	150,000,000	\$ 900,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ 900,000
	Non-accredited Investors	N/A	\$ N/A
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question I.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
		N/A	\$ N/A
	-	N/A	\$ N/A
	Rule 504		\$ <u>N/A</u>
	Total		\$ 0
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$ 5,000
	Legal Fees	_	\$ 100,000
	Accounting Fees	_	<u>s</u> 0
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees senarately)		\$ 0

\$ 15,000

\$ 120,000

Other Expenses (identify) Startup fees, postage, travel and general fund raising expenses

⁴ of 9

(). A ()	A Commission of the commission	ries de l'apresidas dividus en l'apparent	Free Hauss	
	and total expenses furnished in response to Part C-	ering price given in response to Part C — Question I — Question 4.a. This difference is the "adjusted gross		\$ 149,880,000
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross art C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		<u>7,500,000</u>	⊘ \$ <u>0</u>
	Purchase of real estate		<u> </u>	⊘ \$0
	Purchase, rental or leasing and installation of m			
	- "	[-	u
	Construction or leasing of plant buildings and fa	acilities	S 2 0	№ \$ 0
	Acquisition of other businesses (including the v offering that may be used in exchange for the as	ssets or securities of another		
		[-	_
	Repayment of indebtedness		S 2 0	
	Working capital		<u> </u>	[/] \$ <u>1,000,000</u>
	Other (specify):		<u> </u>	₽ \$0
			7 \$ <u>0</u>	⊘ \$ <u>0</u>
	Column Totals		5 7,500,000	\$ 142,380,000
	Total Payments Listed (column totals added)		⊘ \$ <u>14</u>	9,880,000
		A CONTRACTOR CONTRACTO		
sig	ature constitutes an undertaking by the issuer to f	he undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Commis ccredited investor pursuant to paragraph (b)(2) of R	sion, upon writte	
Iss	er (Print or Type)	Signature 1	Date	
M۰	Coy Investments II, L.P.	3	ebruary /8.20	1019
	ne of Signer (Print or Type)	Title of Signer (Print or Type)	Soluting 10, 20	
	ag Saxena	Managing Member of Vedanta Capital, LLC, general	partner of the Issu	rer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

The state of the s		
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date					
McCoy Investments II, L.P.		February 18, 2009					
Name (Print or Type)	Title (Print or Type)						
Parag Saxena	Managing Member of Vedanta Capi	Managing Member of Vedanta Capital, LLC, general partner of the Issuer					

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX											
1	Intend to non-a investor	d to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)*						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL		X	Up to \$150,000,000 in limited periner interests"	0	\$0	0	\$0		X		
AK		X	Up to \$150,000,000 in firmited pertner interests*	0	\$0	0	\$0		X		
AZ		X	Up to \$150,000,000 in limited pertner interests*	0	\$0	0	\$0				
AR		X	Up to \$150,000,000 in limited pertner interests*	0	\$0	0	\$0		X		
CA	Volume (delete le	X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0				
СО		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		\square		
СТ		L X	Up to \$150,000,000 in firmled partner interests*	0	\$0	0	\$0				
DE		X	Up to \$150,000,000 in timited partner interests*	0	\$0	0	\$0				
DC		LX_	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0				
FL		LX_	Up to \$150,000,000 in limited pertner interests*	0	\$0	0	\$0				
GA		X	Up to \$150,000,000 in limited partner interests	0	\$0	0	\$0				
ні		<u>X</u>	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0				
ID		X	Up to \$150,000,000 in timited partner interests*	0	\$0	0	\$0		X		
IL		X	Up to \$150,000,000 in limited partner interests"	0	\$0	0	\$0				
IN		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X		
IA		LX_	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0				
KS		LX	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0				
KY		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X		
LA		<u>X</u>	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0				
ME		LX_	Up to \$150,000,000 in limited partner interests"	0	\$0	0	\$0		IX		
MD		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X		
MA		<u>X</u>	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X		
MI		LX_	Up to \$150,000,000 in limited pertner interests*	0	\$0	0	\$0		<u> X</u>		
MN		<u> </u>	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		<u> X</u>		
MS			Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0				

APPENDIX										
1	Intend to non-a investor	2 I to sell accredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)*					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО		X	Up to \$150,000,000 in timited partner interests*	0	\$0	0	\$0		X	
МТ		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
NE		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
NV		LX_	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
NH		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
NJ		LX_	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
NM		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
NY		<u> </u>	partner interests*	1	\$900,000	0	\$0			
NC		LX_	Up to \$150,000,000 in timited partner interests*	0	\$0	0	\$0		X	
ND		L X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
ОН		LX_	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		<u> X</u>	
ОК		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
OR		X	Up to \$150,000,000 in limited partner exterests*	0	\$0	0	\$0		X	
PA		<u>X</u>	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
RI		IX_	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
SC		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
SD		LX_	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
TN	<u> </u>	X	Up to \$150,000,000 in limited partner interests."	0	\$0	0	\$0		LX.	
TX		IX.	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		IX	
UT		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
VT		<u> X</u>	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
VA		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
WA		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			
wv		X	Up to \$150,000,000 in limited partner interests"	0	\$0	0	\$0			
WI		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0			

				APP	ENDIX					
1	2 3 Type of security					4				
	to non-a investor	to sell ccredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)	Type of investor and expla amount purchased in State waive (Part C-Item 2)* (part C-Item 2)*			amount purchased in State			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	
PR		X	Up to \$150,000,000 in limited partner interests*	0	\$0	0	\$0		X	

^{*}The General Partner reserves the right to offer a greater amount of limited partner interests.

